

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: **2001**

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Covert Housing Commission

PHA Number: MI189

PHA Fiscal Year Beginning: (mm/yyyy) 07/2001

PHA Plan Contact Information:

Name: Ramona Boone

Phone: 616-764-8881

TDD: 800-649-3777

Email (if available): rboone@i2k.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or state government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

- ☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
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<input type="checkbox"/> Other (List below, providing each attachment name)	
Community Service Requirement mi189f01	
Pet Policy mi189g01	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Authority is on schedule with its Plan. It has updated and implemented its policies in compliance with the Quality Housing and Work Responsibility Act of 1998 and has added another year to the five year Capital Fund Plan FY2005. Additionally the Authority has determined it is in compliance with HUD's deconcentration guidelines since the Authority has only one development with 40 units. .

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ __61,512__

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources

- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply)
- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment _____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
- ☒ Other: (list below) The Authority developed the Draft FY2001 Plan in close concert with the RAB therefore the RAB comments were considered and incorporated in every step of the

process. Throughout the year the Authority meets with the RAB to discuss current and upcoming FY Plans, policies, procedures and Authority activities.

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - ☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - ☒ Other: (list below)
 - Preserve existing housing stock
3. PHA Requests for support from the Consolidated Plan Agency
☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
 - Provide technical assistance upon request

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

GOALS

- Additions or deletions of Strategic Goals

B. Significant Amendment or Modification to the Annual Plan:

PROGRAMS

- Any change with regard to demolition or disposition, designation of housing, homeownership programs or conversion activities

CAPITAL BUDGET

- Additions of non-emergency work items (items not included in the current Annual Statement of Five Year Action Plan) or change in use of replacement reserve funds

POLICIES

- Changes to rent or admissions policies or organization of the waiting list

An exception to the above definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements since such changes are not considered significant amendments by HUD.

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Covert Housing Authority		Grant Type and Number Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$61,512			
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$61,512			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Covert Housing Authority		Grant Type and Number Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

[illegible]

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: Covert Housing Authority	Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: 2001
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[illegible]

Capital Fund Program 5-Year Action Plan

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
	HA-Wide	4	10%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
1406 Operations for FY2002 \$61,512 1406 Operations for FY2003 \$61,512 1406 Operations for FY2004 \$61,512 1406 Operations for FY2005 \$61,512			\$246,048	
Total estimated cost over next 5 years			\$246,048	

Required Attachment _D_: Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

- ☐ Elected
☐ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☒ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: A Commissioner announced he is resigning during May 2001 at which time a resident will be appointed to the Board. The Housing Commission's Executive Director is contacting each resident to generate interest in becoming a Commissioner.

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Covert Township Board, Wayne Rendell Township Supervisor

Required Attachment ____E____: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Dale Smith
P.O. Box 66 Apt. 13
Covert, MI 49043

Charlene Wenckowski
P.O. Box 66 Apt. 1
Covert, MI 49043

**COMMUNITY SERVICE REQUIREMENT POLICY
FOR THE COVERT HOUSING AUTHORITY**

SERVICE REQUIREMENT

Except for any family member who is an exempt individual, each adult resident of public housing must:

- 1) Contribute 8 hours per month of community service (does not include political activities); or
- 2) Participate in an economic self-sufficiency program for 8 hours per month; or
- 3) Perform 8 hours per month of combined community service and economic self sufficiency.

COVERED RESIDENTS

All public housing residents between the ages of 18 and 62 years of age who are not exempt.

EXEMPT RESIDENTS

Any public housing resident who is:

- 1) 62 years or older;
- 2) Blind or disabled and who certifies that because of this disability she or he is unable to comply with the requirement of the policy;
- 3) Primary caretaker of a person who is 62 years or older or who is blind or disabled;
- 4) Engaged in work activities;
- 5) Engaged in a work activity under the state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program;
- 6) Member of a family receiving assistance, benefits or services under a state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program and has not been found by the state to be in noncompliance with such a program;

VIOLATION OF SERVICE REQUIREMENT

Violation of the service requirement is grounds for nonrenewal of the twelve (12) months lease agreement, but not for termination of tenancy during the course of the twelve (12) months lease term.

COMMUNITY SERVICE

The performance of volunteer work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities.

QUALIFIED COMMUNITY SERVICE ORGANIZATIONS AND ACTIVITIES

As a convenience to covered residents, the Housing Authority will develop, post on the Authority's bulletin boards and provide to covered residents a list of qualified organizations (and activities) that have agreed to work with residents in helping them satisfy their community service requirement. Residents are not limited to the published list and are encouraged to identify other organizations and activities. To ensure compliance with this community service policy, residents should seek the Housing Authority's approval prior to volunteering for organizations or performing activities not included on the published list. It is the Housing Authority's policy to provide great latitude in approving community service organizations and activities.

DETERMINING RESIDENT STATUS

Per the Housing Authority's approved Admission and Continued Occupancy Policy (ACOP):

- The status of all applicant family members will be determined and families notified during the application process.
- During annual (or every three years for residents paying flat rents) recertifications, the status of each family member will be reviewed and determined.
- Between recertifications, residents are required to notify the Housing Authority within ten (10) days when there is a change in employment, income, family composition or welfare-to-work training or employment activities. The Housing Authority will use this information to determine changes, if any, in family member status.
- Members will be informed verbally and in writing of their community service requirement.

ASSURING RESIDENT COMPLIANCE

The Housing Authority shall review and verify family compliance with service requirements annually at least thirty (30) days before the end of the twelve (12) month

lease term. The Housing Authority will retain reasonable documentation of service requirement performance or exemption in resident family files.

If the Housing Authority determines that a covered family member has not complied with their service requirement, the Housing Authority will notify the family of this determination, describe the noncompliance and state the Authority will not renew the lease at the end of the twelve (12) month lease term unless:

- The family enters into an agreement with the Authority that the noncompliant family member will cure such noncompliance within the twelve (12) month term of the new lease while also satisfying the on-going service requirement.
- Or the family provides written assurance satisfactory to the Authority that the noncompliant family member no longer resides in the unit.

Families may request a grievance hearing on the Housing Authority's determination in accordance with the Authority's approved Grievance Procedure.

SIGNED CERTIFICATIONS

The Housing Authority management staff will provide signed certifications of any community service activities administered by the Authority. In a similar manner, organizations other than the Authority, who administer qualifying activities must provide signed certifications.

The Housing Authority will provide covered residents with three part, prepaid post card size certification forms which the residents will present to the organization administering the qualifying activities for certification approval and signatures. The person(s) approved for signing the certifications will tear the three part, prepaid mailer form apart, give one copy to the resident, keep one copy, and drop the prepaid (and preaddressed) part in the mail back to the Authority. The Authority will file the returned cards in each covered resident's file.

PET POLICY

- I. In compliance with Section 227 of Title 11 of the Housing and Urban Rural Recovery Act of 1983, the Covert Public Housing Commission will permit residents of housing projects built exclusively for occupancy of the elderly and handicapped and low-income housing units for low-income families, to own and keep common household pets in their apartments or units.

COMMON HOUSEHOLD PETS ARE DEFINED AS FOLLOWS

1. BIRD - Including canary, parakeet, finch and other species that are normally kept caged; birds of prey are not permitted.
2. FISH - In tanks or aquariums, not to exceed 40 gallons in capacity; poisonous or dangerous fish are not permitted.
3. DOG - Not to exceed 20 lbs. weight and 18" high at full growth. Veterinarian's recommended/suggested types of dogs are as follows:
 1. Chihuahua
 2. Pekinese
 3. Schnauzer
 4. Poodle
 5. Cock-A-Poo
 6. Dachshund
 7. Terriers
4. CAT - Domesticated

- II. 1. There is a \$100.00 Pet Deposit for tenants that have a pet in their unit or apartment. This is in addition to the Security Deposit. It is refundable should the pet owner no longer keep the pet for whatever reason providing no damage has been incurred by the pet.
- 1A. At no time will the Covert Public Housing Commission approve of exotic pets such as snakes, monkeys, game pets, etc.

Attachment mi189g01

2. Only one pet will be allowed per apartment except for birds (two allowed) and fish.
3. No guest will be allowed to bring pets on the premises.
- 3A. Residents will not be allowed to PETSIT or HOUSE a pet.
4. Each dog or cat must be on a leash when not in owner's apartment. Leash must be no longer than 4 feet.
5. All birds must be provided with, and in a cage, when outside of resident's apartment.
6. Litter boxes must be provided for cats.
7. Dogs must be provided with a pet bed or box (to avoid wear and tear on carpet).
8. All fur-bearing pets must wear flea collars at all times. This rule must be adhered to for the protection of non-pet residents.
9. Dogs and cats shall not be permitted to excrete anywhere in the building (other than cats using a litter box in the resident's apartment). Pet owners shall be responsible for immediately removing feces dropped anywhere in the building, on the grounds, or in the pet run.
 - a. Waste must be placed in a plastic bag, tied securely and deposited in dumpster. Poorly disposed of waste will not be tolerated.
 - b. Tenants owning a cat must provide a litter box for their pets and it should and must be cleaned on a daily basis, disposing of feces in the proper manner.
 - c. **AT NO TIME WILL PET WASTE BE PLACED IN TRASH CHUTES OR TOILETS!!**
10. The Covert Public Housing Commission has designated area(s) on the grounds for "pet runs". These area(s) must be used by pet owners.
11. No pet shall be tied up on the outside of the building or left unattended at any time on Housing Commission property.
12. No dog houses will be allowed on the premises.
13. At no time will pets be allowed in lobbies except when leaving or entering the building.

Attachment mi189g01

14. All apartments with pets must be kept free of pet odors and maintained in a clean and sanitary manner. Resident's apartment will be subject to inspection once a month.
15. If pet poses a nuisance, such as excessive noise, barking or whining, which disrupts the peace of the complex, owner will remove the pet from the premises if management so requests, within ten days.
16. Every pet must be registered annually with the Covert Public Housing Commission's Management Office. Registration requires the following:
 - a. Proof of current license
 - b. Proof of inoculations (as required by Veterinarian)
 - c. Identification tag
 - d. Proof of spaying or neutering
 - e. Photograph of pet (no smaller than 3 x 5")
 - f. All cats must be de-clawed, or have a scratching post
17. Every dog and cat must wear a license, rabies tag and a tag bearing the owner's name, address and phone number.
18. Before acquiring a pet, the owner must have on file with the Housing Commission a notarized statement naming the person(s) accepting responsibility for the care of their pet in case of owner's illness, hospitalization, other emergencies, or when owner is absent. In event of owner's absence or other responsible person, pet will be placed in a kennel at owner's expense.
19. Pet owner agrees to immediately remove or allow the Commission to remove any pet within the scope of this policy for improper Maintenance.
20. Violation of the Covert Public Housing Commission Pet Policy will be grounds for the termination of lease.

I have reviewed and understand the above regulations and agree to conform to the same and understand that violation of the rules may result in a requirement to permanently remove the pet from the unit within 14 days or vacate the dwelling.

Tenant

Date

Housing Commission Staff

Date

Attachment mi189g01

PET PERMIT

I hereby make application for written permission to keep the following pet in my dwelling unit, as a resident of the Covert Public Housing Commission:

Type of Animal

My alternate pet custodian is:

Name: _____

Address: _____

Phone Number: _____

I fully understand the rules and regulations regarding the privilege of keeping a pet and agree to abide by those rules and regulations.

Resident Signature

Date

Executive Director Signature

Date